Please type a plus sign (+) inside this box	$\overline{}$
Please fring a plus sign (+) incide this hav	 1 + 1
r lease type a plus sign (1) inside this box	 1 ' 1

PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number

## DECLARATION FOR UTILITY OR **DESIGN** PATENT APPLICATION (37 CFR 1.63)

 □ Declaration Submitted with Initial

Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number		PG 100	
First Named Inventor		Abraham J. Domb	
COMPLI	ETE IF	KNOWN	
Application Number			
Filing Date	Jan	uary 10, 2002	
Group Art Unit			
Examiner Name			

## As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

## CATIONIC POLYSACCHARIDE COMPOSITIONS

he specification of which	(Title of the Invention)
/] is attached hereto OR was filed on (MM/DD/YYYY)	as United States Application Number or PCT International
pplication Number and	(if applicable).
hereby state that I have reviewed and understand mended by any amendment specifically referred t	If the contents of the above identified specification, including the claims, as to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO		
140,844	ISRAEL	01/10/2001			v 100	

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below

numbers are listed on a						
numbers are listed on a supplemental priority data sheet	Application Number(s)	Filing Date (MM/DD/YYYY)	7			
			supplemental priority data sheet			

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time—you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

The state of the s

## **DECLARATION** — Utility or Design Patent Application

Direct all correspondence to:  Customer Number or Bar Code Label  OR Correspondence address below							
Name Patrea L. Pabst							
Address Holland & Knight I	LLP					1000	
Suite 2000, One At	lantic Cer	nter; 12	01 West	Peach	tree Street, N	.E.	
City	<del></del>			State	GA	ZIP 30309-	-3400
Country USA	1	Telephone	e (404)	817-84	473	Fax (404) 8	17-8588
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INV	ENTOR:			A petiti	on has been fil	ed for this unsi	gned inventor
Given Name Abra (first and middle [if any])	aham J.	1		Family l		Domb	
Inventor's Signature Date							
Residence: City Efrat			State		Country Israel	Citizenship	IL
Mailing Address Migdal Eder 16							
Mailing Address							
City Efrat	State			ZIP	90435	Country	ISRAEL
NAME OF SECOND INVENTOR:   A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])  Family Name or Surname							
Inventor's							
Signature			<u> </u>			Date	
Residence: City			State		Country	Citizenship	
Mailing Address							
Mailing Address							
City	State			ZIP		Country	
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							